PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail

Mail Stop ISSUE FEE
Commissioner for Patents
P.O. Box 1450
Alexandria, Virginia 22313-1450
or Fax (571)-273-2880

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks I through 5 should be completed where appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be annualed to the current correspondence address a single-left depression of the control production of the control products and the control products are part of the control products and the control products are part of the control products and the control products are part of the control products and the control products are part of the control products and the control products are part of the control products and the control products are part of the control products and the control products are part of the control products and the control products are products are products and the control products are products and the control products are products are products and the control products are products and the control products are products are products are products and the control products are products are products are products are products are

indicated unless correct maintenance fee notifica	ed below or directed of	herwise in Block 1, by (arate "FEE ADDRESS" for	
CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)				Note: A certificate of mailing can only be used for domestic mailings of the Fec(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.			
20350	7590 12/21	1/2006	nave				
TWO EMBARO EIGHTH FLOO	CADERO CENTER OR		LP I her State addr trans	Levely certify that this Fee(s) Transmission Challet Evel Level States Posted Service With States Posted Service With the United States Posted Service With states Posted Service With the United Seathers of the Mell Stop 1882 Posted Service Servic			
SAN FRANCIS	CO, CA 94111-383	4	A	ndrea S. Beck		(Depositor's name)	
			√ 5	1.1.1		(Signature)	
				3/20/07		(Date)	
APPLICATION NO.	FILING DATE		FIRST NAMED INVENTOR	AT	ORNEY DOCKET NO.	CONFIRMATION NO.	
10/772,064 02/03/2004				018865-012810US	4533		
TITLE OF INVENTION	I: ALTERNATIVE FLIF	CHIP IN LEADED MO	LDED PACKAGE DESIG	N AND METHOD FOI	R MANUFACTURE		
APPLN, TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE FEI	TOTAL FEE(S) DUI	DATE DUE	
	NO NO	\$1400	\$300	\$0	\$1700	03/21/2007	
nonprovisional				3º 1	31700	03/21/2007	
EXAMINER		ARTUNIT	CLASS-SUBCLASS	J			
BREWSTER, WILLIAM M 2823 1. Change of correspondence address or indication of "Fee Address" (37			438-108000	C	m	1 1	
CFR 1.363).			2. For printing on the patent front page, list (1) the names of up to 3 registered patent attomeys or agents OR, alternatively,				
Change of corresp	ondence address (or Cha B/122) attached.	inge of Correspondence					
"Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.			(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.				
3. ASSIGNEE NAME A	ND RESIDENCE DATA	A TO BE PRINTED ON	THE PATENT (print or typ	oc)			
PLEASE NOTE: Un recordation as set for	less an assignee is ident th in 37 CFR 3.11, Com	tified below, no assignee pletion of this form is NO	data will appear on the pa T a substitute for filing an	atent. If an assignee is assignment.	identified below, the	document has been filed for	
(A) NAME OF ASSI			(B) RESIDENCE: (CITY and STATE OR COUNTRY)				
Fairchild Semiconductor Corporation South Portland, Maine							
Please check the approp	riate assignee category or	categories (will not be p	rinted on the patent) :	Individual 🚨 Corpor	ation or other private gr	roup entity Government	
4a. The following fee(s)	are submitted:	4	b. Payment of Fee(s): (Plea	se first reapply any pi	eviously paid issue fee	shown above)	
Issue Fee			A check is enclosed.				
Publication Fee (No small entity discount permitted)			☐ Payment by credit eard. Form PTO-2038 is attached. ☐ The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpsyment, to Deposit Account Number 20—1430 (enclose an extra copy of this form).				
Advance Order -	# of Copies		overpayment, to Depo	sit Account Number _2	0-1430 (enclose	an extra copy of this form).	
	tus (from status indicate						
	is SMALL ENTITY state		b. Applicant is no long				
NOTE: The Issue Fee ar interest as shown by the	nd Publication Fee (if req records of the United Sta	uired) will not be accepte ites Patent and Trademark	d from anyone other than to Office.	he applicant; a registere	d attorney or agent; or	the assignee or other party in	
Authorized Signature	-/-			Date 3/	20/07		
Typed or printed name Patrick R. Jewik			Registration No. 40,456				
This collection of informan application. Confider submitting the complete this form and/or suggest Box 1450, Alexandria, Virginia 22.	nation is required by 37 C ntiality is governed by 35 d application form to the ions for reducing this bu Virginia 22313-1450. DC 313-1450.	CFR 1.311. The informati 5 U.S.C. 122 and 37 CFR 6 USPTO. Time will vary rden, should be sent to the O NOT SEND FEES OR	on is required to obtain or r 1.14. This collection is est depending upon the indiv the Chief Information Office COMPLETED FORMS TO	retain a benefit by the primated to take 12 minuridual case. Any commer, U.S. Patent and Trado THIS ADDRESS. SE	ablic which is to file (ar tes to complete, includi- ents on the amount of t emark Office, U.S. De ND TO: Commissioner	nd by the USPTO to process) ng gathering, preparing, and ime you require to complete partment of Commerce, P.O. for Patents, P.O. Box 1450,	

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.